

**MISSOURI
DEPARTMENT OF HIGHER EDUCATION**

**APPLICATION FOR RECERTIFICATION
OF APPROVAL TO OPERATE
IN MISSOURI FOR PURPOSES
OF STUDENT RECRUITMENT**

Pursuant to Sections 173.600 through 173.619, **RSMo**

Submitted By:

(Name of School)

Date of Submission:

**THESE FORMS VALID ONLY
IF SUBMITTED BY**

MARCH 15, 2005

PROPRIETARY SCHOOL APPLICATION FOR RECERTIFICATION

INTRODUCTION

Purpose

This application is to be completed only by schools seeking **annual recertification** to operate for **purposes of student recruitment** or related activity within the state of Missouri. All current certificates expire **June 30**, and failure to submit an application for recertification will result in the lapse of certification.

Certification in this category is authorization to maintain a physical presence in the state of Missouri for purposes only of student recruitment and related activity. Recruit-only certification does not authorize the operation of an instructional facility or the delivery of instructional courses or programs in Missouri. Physical presence, in the context of recruitment operations, shall mean any address, physical location, electronic device, or telephone number within the boundaries of the state of Missouri from which promotional material is distributed or recruitment effort initiated and/or to which potential or prospective students may inquire or respond. Physical presence does not include advertising through printed or electronic media as long as the initiation for that advertising is not within this state or the advertising does not identify any Missouri presence.

Application Completion Options

The application consists of three sections and the instructions for completion may be found at the beginning of each section. In an effort to simplify and expedite the recertification process, the department has discontinued providing printed application forms and adopted an electronic format for the recertification application. The complete application is available on the Department of Higher Education Internet site (www.dhe.mo.gov) in Adobe Acrobat (PDF) document format or as a Microsoft Word document. Any computer with Internet access should be able to download the application. The PDF version will require Acrobat Reader, available free at www.adobe.com/products/acrobat/readermain.html. The Microsoft Word version should be accessible using any Word 97 or later release.

There are two options for completing the application.

Option One: You may complete the paper application, just as you have in previous years. You can receive a paper copy by downloading either version of the entire application to your computer and printing the document in its entirety. If you are unable to access the application electronically, you can contact the Department of Higher Education and we will send you a printed application packet.

Option Two: You can complete the Microsoft Word version of the application electronically. To complete the form in this manner, you must access the application from our Internet site, complete it electronically (either while connected to our site or by saving a copy to your computer hard drive) and save/print the completed application. More detailed instructions for this option are available on the department Internet site.

In addition to a complete application, the data forms that may require the submission of multiple pages can be accessed separately from the application on our Internet site.

Submission Procedures

Once you have completed the application, you must print a copy of the entire application, sign and initial all pages requiring original signatures or initials and submit it along with all exhibit materials to the department. Please **submit one** completed copy to the Department of Higher Education and **retain one** completed copy for your records. Do not submit the application by e-mail or other electronic means.

The department must receive your completed application by the deadline of **March 15, 2004**. Please submit your packet to the Missouri Department of Higher Education, Proprietary School Certification, 3515 Amazonas Drive, Jefferson City, Missouri 65109. It is recommended that you send the application materials using a method that provides a return receipt so you can verify timely delivery.

Do **NOT** send your certification fee with this application. We cannot accept the fee before making a determination regarding your eligibility for recertification.

Review Procedures

Care and diligence are required in the preparation of this application. Incoming applications are reviewed for completeness in preparation for an in-depth evaluation. At the time of intake and screening, you will receive acknowledgement that your application was received and *notification concerning its completeness*. If you are notified that your application is incomplete, you must provide the requested information promptly. Detailed review of the application will not proceed until all application materials are complete. Failure to submit the requested information in a timely manner may result in the denial of certification to operate.

All complete applications will be comprehensively evaluated after the March 15 deadline. Because of the thorough nature of these reviews and the volume of applications received, completion of the evaluation process requires at least 45 days. You will receive *written notification of the results of the evaluation*. It is imperative that you **respond immediately** if you receive a request for additional information regarding your application. If the department does not receive sufficient information to make a determination on your application, your certification may be delayed past the June 30 deadline.

When you receive confirmation that your institution is eligible for recertification, you will also be notified regarding the payment of the **certification fee** and the submission of verification of an adequate **security deposit**, both of which are required conditions of recertification. Once those items have been received, a **certificate of approval** and an official **program inventory** will be issued.

Information and Assistance

If you have questions or require additional assistance, visit our website at www.dhe.mo.gov or contact the Proprietary School Certification Program staff at (573) 751-2361.

SECTION I

CERTIFICATION STANDARDS

INSTRUCTIONS

This section contains a series of statements regarding the standards required for certification to operate. A school official must initial each statement and by doing so attests that the school is in compliance with that standard. The name and title of the school official who initials the attestations must be provided on page nine of the application. Regardless of who initials the items, the school official signing the application is responsible for the accuracy and completeness of all information provided in the application. **If you are unable or unwilling to attest to compliance with any item, attach a full narrative explanation as Exhibit Six, at the end of the application.**

Applications will be returned as incomplete if any of the following occur:

- The school official initialing this section is not identified.
- A statement has not been initialed and no explanation is attached as Exhibit Six.
- The school official's initials are typed into the blanks.
- The blanks contain ✕'s, ✓'s or anything other than the school official's original initials.

INSTITUTIONAL STANDARDS

1. ____ (Initial) The school has an exact physical location or locations at, from, or through which instruction is offered.
2. ____ (Initial) The purpose of the school is legitimate and acceptable educationally and is supported by the operations and programs of the school.
3. ____ (Initial) The school will maintain a physical plant and equipment commensurate in size, accommodations and condition to the purpose and programs of the school.
4. ____ (Initial) The school will maintain all learning resources, such as educational equipment, computer hardware and software, library holdings, and telecommunications equipment, sufficient to meet the educational objectives of all courses and programs.
5. ____ (Initial) The school will maintain compliance with all pertinent ordinances and laws relating to the safety, health, and security of the persons on the premises.
6. ____ (Initial) All media advertising and other informative or promotional materials, including those printed, published, recorded, or presented descriptive of the school will truthfully represent the characteristics of the school.
7. ____ (Initial) Advertising and promotional materials, as described in Item 6, will include the name of the school and specify either the school mailing address, the telephone number, or both.
8. ____ (Initial) Advertising and promotional materials, as described in Item 6, when referencing Missouri certification status, will only refer to the school as being either “certified to operate” or “approved to operate” by the “Missouri Coordinating Board for Higher Education” or the “Missouri Department of Higher Education.”
9. ____ (Initial) Advertising and promotional materials, as described in Item 6, will not state that the school, its programs, certificates, or degrees are accredited, certified, or approved by the Coordinating Board for Higher Education, the Department of Higher Education, or by the State of Missouri or any of its agencies.
10. ____ (Initial) Employment or want ad sections or services of any newspaper or other advertising medium will not be used for purposes of student recruitment.
11. ____ (Initial) Advertising and promotional materials, as described in Item 6, will not state the school is accredited by any organization that is not an accrediting agency officially recognized by the United States Department of Education.
12. ____ (Initial) Advertising and promotional materials, as described in Item 6, will not omit or conceal any material information that by its omission obscures a truthful description of the school, its programs, or its services.
13. ____ (Initial) The school will maintain documentation for the verification of the accurateness of all information contained in advertising and promotional materials.

PROGRAM STANDARDS

14. ____ (Initial) The instructional programs of the school legitimately support the stated purpose of the school and each course of instruction meets its stated objectives.
15. ____ (Initial) Earned degrees or certificates will not be given, awarded or granted in the absence of an instructional component offered and conducted by the school.
16. ____ (Initial) The school will maintain a catalog or other publication that contains all program information outlined in the publication checklist found on pages 26-28, and that will be provided to all students and any prospective students upon request.
17. ____ (Initial) Earned certificates or degrees will not be given, awarded or granted solely on the basis of payment of tuition or fee, credit earned at another school or schools, on the basis of credit for life experience or other equivalency, on the basis of testing out, on the basis of research and writing, or solely on the basis of any combination of these factors.

PERSONNEL STANDARDS

18. ____ (Initial) The school has a formal governance structure consistent with its form of ownership or corporate identity that is capable of adequately directing, administering, and operating the school and is capable of developing and maintaining its instructional programs.
19. ____ (Initial) The school will maintain sufficient administrative, instructional, and support personnel based on its student enrollment and relative needs for educational and support services.
20. ____ (Initial) All instructional personnel (any personnel who train or deliver instruction or who measure, assess, or evaluate student achievement) must have a combination of educational and experiential qualifications in excess of the level of instruction on which they are instructing.
21. ____ (Initial) All instructional personnel (as defined above) must have relevant qualifications, training, and experience in the subject or discipline area in which they are teaching.

FINANCIAL STANDARDS

- 22. ____ (Initial) The school has a sound financial structure with sufficient resources for its continued operation.
- 23. ____ (Initial) The school demonstrates financial stability and responsibility through reasonably prompt satisfaction of operational financial obligations, its capital indebtedness obligations, its personnel payroll, and its student financial refund obligations.
- 24. ____ (Initial) The school continuously maintains the required financial security deposit on forms provided by the department.
- 25. ____ (Initial) If financial aid is available to students attending the school, the school attests that the administration of governmental student financial aid, including grants and loans, awarded through or by the school, is in compliance with all applicable laws and regulations.

STUDENT COST STANDARDS

- 26. ____ (Initial) The school will fully disclose any and all financial charges to the students, and this disclosure will be maintained through a catalog or other printed or published informative material, and made available to all students and any prospective students upon request.
- 27. ____ (Initial) The school will provide for a period during which the enrollment agreement may be cancelled by the student with refund of all monies paid. That cancellation period shall not be less than three (3) days, exclusive of Saturday, Sunday, and holidays.
- 28. ____ (Initial) The school will maintain a fair and equitable student tuition refund policy through at least one-half of the enrollment period.
- 29. ____ (Initial) The refund policy maintained by the school will specify fees or other expenses which are non-refundable beyond the required period of cancellation specified in Item 27.
- 30. ____ (Initial) The refund policy maintained by the school will specify a maximum time lapse for the refund to be made and any conditions under which there would be no refund.
- 31. ____ (Initial) The school will disclose to students any conditions under which the refund would be made to a person other than the student.

STUDENT SERVICES STANDARDS

32. ____ (Initial) The school will maintain and fairly and equitably enforce admission procedures and requirements which reasonably assure that the students admitted are capable of achieving and informed concerning the qualifications, competency levels, and/or proficiencies necessary to achieve the stated goals of the instruction offered and which are nondiscriminatory in their application.
33. ____ (Initial) The school will maintain and disclose in a catalog or other publication all policies governing students, as listed on the publication checklist located on pages 26-28 of this application, and the expectations of reprimand, punishment, or termination for violation of any of these policies.
34. ____ (Initial) The school will maintain a written enrollment agreement containing all required elements, as listed on the enrollment agreement checklist located on page 29 of this application, and will provide a copy of the completed agreement to all accepted students.
35. ____ (Initial) The school will permanently maintain an individual transcript record for each student currently or formerly enrolled at the school. Unless the transcript is destroyed by an act of nature, the institution will not refuse to issue a transcript on a student's written request, except for the reason of student nonpayment of a financial obligation to the school.
36. ____ (Initial) The transcript maintained by the school will include all required elements, as listed on the transcript checklist located on page 30 of this application.

ATTESTATION

By my signature, I affirm my understanding of and agreement with the following:

Certification in this category is authorization to maintain a physical presence in the state of Missouri only for the purpose of student recruitment and related activity. Recruit-only certification does not authorize the operation of an instructional facility or the delivery of instructional courses or programs in Missouri. Physical presence, in the context of recruitment operations, shall mean any address, physical location, electronic device, or telephone number within the boundaries of the state of Missouri from which promotional material is distributed or recruitment effort initiated and/or to which potential or prospective students may inquire or respond. Physical presence does not include advertising through printed or electronic media as long as the initiation for that advertising is not within this state or the advertising does not identify any Missouri presence.

If this application is approved, approval is valid only under the stipulations as set forth in the Missouri Code of State Regulations 6 CSR 10-5.010.

The Department of Higher Education may, on its own cognizance, provide information about this application and the school to other governmental agencies and to accrediting associations and public access to the department's files on the school will be in accordance with applicable law.

The initials contained on each of the numbered items are those of an official of the school legally authorized to act on behalf of the school and attest to the fact that the school is in compliance with all applicable rules and regulations.

The statements and information in this application or attached to this application (including any information submitted in an electronic format) are certified to be true and correct.

Signature of Owner or Chief Administrator

Title

Date of Signing

Name of Person Initialing the Application (if different)

Title

SECTION II

INSTITUTIONAL INFORMATION

INSTRUCTIONS

This section includes information regarding the school's physical location(s), ownership, control, and accreditation, as well as five data collection reports (Program Inventory; Personnel; Finance; Report of Tuition and Fees of Missouri Recruited Students; and Enrollment, Graduation, and Employment of Students Recruited from Missouri). The information collected in this section pertains to the school's eligibility for recertification and about its students.

The Department of Higher Education is responsible for compiling, analyzing, publishing and distributing descriptive information about the proprietary school sector. The data reported in this section are aggregated and reported by the department.

Location, Ownership, Control and Accreditation:

The information provided identifies the official name, physical location(s), mailing address, telephone and facsimile numbers, and the web address of the school. Additionally, it establishes the type of ownership and control of the institution and the status of the institution with any accrediting or approving agencies.

Finally, this section provides information regarding branch campuses and/or extension sites that the institution may have. Certification for purposes of student recruitment is extended to verified branch campuses of the certified school. A **branch campus** is defined as a geographically separate and permanent instructional facility, which is derived from and controlled by its main campus. In order to be included within the main campus certificate of approval, verification of the branch's status with the school's native state and/or accrediting commission is required. An **extension site** is defined as any geographically separate and either temporary or permanent instructional facility located within reasonable geographic proximity to a main or branch campus, which is entirely auxiliary to and operated by a main or branch campus. An extension site does not provide distinct programs, employ significant administrative personnel, or maintain its own institutional or student records.

- *Please note that if there are any changes to the institutional information provided in this section during the recertification year, you must notify the department at least thirty days prior to the effective date of that change.*

Instructions for each of the data collection reports may be found immediately before the required form.

LOCATION/OWNERSHIP/CONTROL/ACCREDITATION

37. Official School Name as it should appear on the school's certificate to operate and all school publications.

38. Physical Address of the School:

Mailing Address if different:

School Telephone Number:

School Facsimile Number:

School Website, if applicable:

(Note: Electronic mail (e-mail) addresses are reported as part of the personnel information.)

39. A. Indicate the form of school ownership/control by marking one of the following:

☐ Individual ☐ Partnership ☐ Private or Public Corporation

☐ Board of Trustees/Directors ☐ Other – Specify:

B. If the ownership is a corporation, indicate state in which incorporated

 and whether it is

☐ For-Profit **OR** ☐ Not-for-Profit.

C. Name of Owner:

Address of Owner:

D. If ownership is a partnership, or a for-profit corporation, give the name(s) of person(s) holding an ownership interest of ten percent or more. If not-for-profit and controlled by a governing board, indicate board size and list the current officers.

40. Indicate whether the school is currently accredited by an accrediting association recognized by the U.S. Department of Education. ☐ **YES** ☐ **NO**

List all associations by which the school is accredited **whether or not** they are recognized by the U.S. Department of Education and indicate when the current grant of accreditation will expire.

_____ Exp. Date _____
_____ Exp. Date _____
_____ Exp. Date _____
_____ Exp. Date _____

41. Indicate whether the school has programs that are approved or certified by federal or state agencies, for example Vocational Rehabilitation, Veterans, etc. ☐ **YES** ☐ **NO**

If yes, list all such agencies.

42. The school listed in Items 37 and 38 has:

Branch Campuses: ☐ **NO** ☐ **YES** **How many?** ____

Extension Sites: ☐ **NO** ☐ **YES** **How many?** ____

Certification to recruit students is extended to verified branch campuses of the certified school. These must be legitimate branches of the applicant school identified in Items 37 and 38. They may not be free-standing schools under a single parent corporation. List all branches of the applicant school on the branch campus information sheet, page 12, with one form per branch campus location.

Branch Campus Information:
Branch Identification: DHE -
(See lower right corner of branch certificate.)

Physical Address: _____

Mailing Address if different: _____

Telephone Number: _____ Facsimile Number: _____

Website (if different from main campus): _____

Name of Chief Administrative Officer: _____

Title of Chief Administrative Officer _____

Name of Designated Campus Contact: _____

Title of Designated Campus Contact _____

DUPLICATE AND ATTACH ADDITIONAL PAGES AS NEEDED

If you are completing the application electronically, click [here](#) to access a separate copy of this page for use in completing additional pages as needed.

PROGRAM INVENTORY INSTRUCTIONS APPLICATION ITEM 43

This item requests information about the inventory of instructional programs to be offered by the school during the 2005-2006 certification year for which Missouri students will be recruited. This application item establishes the programmatic scope of the school's certificate of approval and must accurately and completely report each instructional program to be offered by the school. This application item is one of the most **crucial** and requires extreme diligence in its completion. A program or program of instruction is defined as a complete academic or vocational education offering which fulfills the requirements for the awarding of a certificate or degree. A program may consist of one or multiple courses, and shall, upon satisfactory completion, fulfill an academic, occupational, or other training objective.

Item 43 must include, for each instructional program offered:

- The appropriate CIP code (A searchable database of CIP codes is available on the Internet at nces.ed.gov/pubs2002/cip2000/. More information is available by request from the department or you can visit nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2002165 for the complete document.)
- The official program title as it appears in school publications.
- The length of the program in weeks.
- The number of contact or credit hours required for completion of the program. If credit hours are used, please indicate if they are semester or quarter based. If progress and completion are not measured in hours, please report the number of lessons or other measures used for this purpose and attach an explanation/definition of these items.
- Tuition, fees, and other costs of enrolling in and completing the program.
- The exact designation of the award granted upon satisfactory completion of the program.

The inventory provided with this application will be compared to the school's previous application to identify any variations. It will also be used as a basis for evaluating the disclosure of programmatic information in advertising and publications and for the department's profile of the institution that is available to the public.

- *Please note that any substantial changes to the programmatic offerings of the school, including the initiation of new programs, must be approved by the department before implementation. You must notify the department at least thirty days prior to the effective date of the change, so we may review the related materials and update the scope of your certificate to operate. **The addition of new programs should not be a part of the recertification process.** The department expects schools to follow the above procedure for the initiation of all new programs.*

This form (application item 43) is available separately from the complete application. If additional pages of the form are necessary to report branch campus information or more programs than one form will allow, please click [here](#) for access as needed.

**A SEPARATE ITEM 43 MUST BE COMPLETED FOR EACH BRANCH CAMPUS
RECRUITING STUDENTS UNDER THE AUTHORITY OF THIS SCHOOL.**

(DHE code may be found in the lower right hand corner of the current certificate)

Item 43: Program Inventory

School Name: _____ Location: _____ DHE Code: _____ - _____

For each instructional program offered, provide the information requested below. For CIP codes, contact the department or visit the NCES Internet site listed on the previous page. Hour types may be SCH (Semester Credit Hour), QCH (Quarter Credit Hour), or CH (Contact Hour). If another measure of progress is used (lessons, competencies, etc.), please indicate and attach an explanation.

CIP Code	Program Title	Length (weeks)	Hours		Tuition	Fees	Cost of Books & Supplies	Award	
			Number	Type				Non- degree (Cert.)	Degree (AAS, BS, etc.)
				Select				None	
				Select				None	
				Select				None	
				Select				None	
				Select				None	
				Select				None	
				Select				None	
				Select				None	
				Select				None	
				Select				None	

Duplicate this page if additional space is needed and for each branch location

PERSONNEL DATA AND LISTING INSTRUCTIONS

The information provided on this form verifies the institution employs adequate administrative and support staff and a sufficient number of qualified instructors.

All schools must complete Item 44. This form reports the number of administrative and instructional staff for each location of the school, whether or not they are full-time or part-time, and identifies recruitment agents assigned to work in the state.

Report the **number** of administrative and instructional staff employed in each category (full-time or part-time) for each (main or branch campus) location of the school. The form requests the campus DHE identification number to determine the staff location. That number is found in the lower right corner of the certificate of approval.

Please note that while it is possible for a school to employ one person as both an administrator and an instructor, it is not appropriate to list that person as full-time in both categories.

The bottom of this form contains information regarding the name, title, address and telephone number of each agent working in Missouri. Additionally, if the school maintains an office from which recruitment occurs, provide all address information.

Duplicate as necessary to provide information for each main and branch campus for which recruiting activities will occur.

- *All schools must provide additional information about school personnel as part of **Exhibit Four**, Personnel Information. Please review the instructions for that section of the application.*

This form (application item 44) is available separately from the complete application. If you are completing the application electronically and additional pages of the form are necessary to report branch information, please click [here](#) for access as needed.

Item 44
Personnel Data
List Number in Each Category

Main Campus DHE Identification Number: _____ - **00**

PERSONNEL	Full-time	Part-time
Administrative		
Instructional		

Branch Campus DHE Identification Number: _____ - _____

Location _____

PERSONNEL	Full-time	Part-time
Administrative		
Instructional		

Branch Campus DHE Identification Number: _____ - _____

Location _____

PERSONNEL	Full-time	Part-time
Administrative		
Instructional		

Missouri Agent Information (if applicable):

NAME: _____ **TITLE** _____

ADDRESS: _____

TELEPHONE NUMBER: _____

Missouri Recruitment Office Information (if applicable):

ADDRESS: _____

TELEPHONE NUMBER: _____

DUPLICATE AND ATTACH ADDITIONAL FORMS AS NEEDED

FINANCIAL STATEMENT

INSTRUCTIONS

The income and expenditure data submitted in this section provide a basis for determining the school's compliance with the standards requiring a sound and adequate financial structure supporting continued operation of the school. This section of the application includes a financial statement showing major categories of income and expenditure for the last completed school fiscal year, and reports the certification fee and security deposit requirements that are based on that financial information. As a financial report for all school-related activities, a single financial statement should be submitted that includes information for all campuses and instructional locations of the school identified in Items 37 and 38. Completion of the included financial statement is a required part of the school application for recertification to operate. Other financial statements may be attached to the application as Exhibit Five but *may not be substituted* in lieu of this statement.

Name of School: Official name of the school as shown on the application.

School ID: Enter the DHE identification number from last year's certificate to operate (located in the lower right corner.)

Item 45: Enter the 12-month period for which data are reported, as determined by the school. The time period for this report should be the most recent fiscal year for which financial information is available.

Signature of School Owner or Chief Administrative Officer: This line **must** include an **original signature** of one of the indicated school officers.

- *The information contained in the financial statement establishes the amount of the certification fee (Item 54) and the security deposit requirement (Item 55). The formula for calculating the amount of each is described in the related application item. Do **NOT** submit the certification fee or the security deposit with this application. Information concerning the submission of those items will be provided after the application has been reviewed and approved.*

The security deposit, as required by law, must cover any and all Missouri locations and all agents of the school and must remain in place continuously in order for the school to maintain its certificate of approval. Compliance must be by a performance surety bond, irrevocable letter of credit, or cash bond secured by a certificate of deposit.

- *Because this form requires an original signature, a signed hard copy of this form must be submitted with the application.*
- **This form is available separately from the complete application. If access to another copy of this page is necessary, click [here](#) to access as needed.**

Coordinating Board for Higher Education

Financial Statement

Income and Expenditures for the Most Recently Completed School Fiscal Year

Name of School: _____	School ID: - <u>00</u>
School Address: _____	

45. Reported fiscal year starts _____ and ends _____ .
--

INCOME:

46. Tuition Paid by Students Recruited from Missouri
(All tuition less refunds, books, tools and supplies.)

47. Fees Paid by Students Recruited from Missouri
(Not included in tuition.)

48. Total Tuition and Fees from Missouri Students
(Sum of Items 46 and 47.)

49. Other Income
(All non-Missouri tuition and fees; as well as all books, tools, supplies, etc.)

50. Total Income (Sum of Items 48 and 49.)

\$0
\$0

EXPENDITURES:

51. Payroll (Total for all employees, not including fringe benefits.)

52. Nonpayroll Expenditures

53. Total Expenditures (Sum of Items 51 and 52.)

\$0

The information provided on this financial statement is correct and accurate to the best of my knowledge.

_____ Signature of School Owner or Chief Administrative Officer	_____ Date
_____ Typed or Printed Name and Title	

CERTIFICATION FEE AND SECURITY DEPOSIT REQUIREMENT

54. The dollar amount of the certification fee must be calculated by the school as described below:

\$250 plus \$.001 multiplied by Item 48 (net tuition and fee income paid by student recruited from Missouri for the preceding year).

$$\$250 + \$.001 \times \frac{\$0}{\text{Item 48}} = \underline{\$250}$$

The minimum certification fee is \$250. If the amount calculated is greater than the maximum of \$2,500, the school certification fee will be \$2,500. For amounts calculated that fall between these numbers, please round to the nearest dollar.

Please enter the amount of the certification fee: _____

DO NOT SUBMIT THE CERTIFICATION FEE WITH THIS APPLICATION

55. The dollar amount of the security deposit requirement must be calculated by the school as described below:

Ten (10) percent multiplied by Item 46 (gross tuition income paid by students recruited from Missouri for the preceding year).

$$.10 \times \frac{\$0}{\text{Item 46}} = \underline{\$0}$$

If the deposit amount calculated is less than the minimum of \$5,000, the security deposit required for the school will be \$5,000. If the deposit amount calculated is greater than the maximum of \$25,000, the security deposit required for the school will be \$25,000. For those amounts calculated between these two numbers, please round to the nearest dollar.

Please enter the amount of the security deposit: _____

The security deposit is already on file for schools seeking recertification. If replacement of the security deposit or increase in the amount of the security deposit currently on file is required, it will be requested prior to issuance of the certificate.

DO NOT SUBMIT SECURITY DEPOSIT MATERIALS WITH THIS APPLICATION

**REPORT OF TUITION AND FEES PAID BY STUDENTS
RECRUITED FROM MISSOURI
FORM DHE 01-R**

INSTRUCTIONS AND EXPLANATIONS

SCHOOL NAME AND ADDRESS: Official name and address of the institution as shown on the application for recertification.

REPORTING PERIOD: The reporting period should be the most recently completed fiscal year for which data are available.

SCHOOL ID: Enter identification number from last year's certificate to operate (lower right corner.)

AUTHORIZED SIGNATURE: Original signature of school official responsible for data accuracy and integrity. The last page of the report is the only one that must be signed.

-
-
1. Report only tuition and fees paid by students recruited from Missouri.
 2. Column (2): Name of Town or City is sufficient.
 3. Columns (3) and (4) are exclusive of refunds, books, tools and supplies.
 4. The grand totals for all pages of the DHE 01-R report, for each of columns (3), (4), and (5) must be given on the last page of the report.
 5. The grand total of column (3) must equal the entry in Item 46 of the application. The grand total of column (4) must equal the entry in Item 47 of the application. The grand total of column (5) must equal the entry in Item 48 of the application.
-
-

**COMPLETE FORM DHE 01-R ON NEXT PAGE
DUPLICATE THE FORM IF ADDITIONAL SPACE IS NEEDED**

This form is available separately from the complete application. If you are completing the application electronically and additional pages of the form are needed, please click [here](#) for access.

- *Because this form requires an original signature, a signed original of this form must be submitted with the application.*

Coordinating Board for Higher Education

FORM DHE 01-R

Report of Tuition and Fees Paid by Students Recruited from Missouri During the School's Last Completed Fiscal Year

Name of School:	Reporting Period: Fiscal Year Ending on:
Address of School:	
School ID: DHE - <u>00</u>	

Please Note:

The total of Column (3) must agree with the entry for Item 46 of the application.

The total of Column (4) must agree with the entry for Item 47 of the application.

The total of Column (5) must agree with the entry for Item 48 of the application.

(1) Name of Student	(2) Missouri Address	(3) Tuition Paid	(4) Amount of Fees Paid	(5) Total Tuition & Fees Paid
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
Total (Last Page Only)		\$0	\$0	\$0

Authorized Signature (Last Page Only)

**STUDENTS RECRUITED FROM MISSOURI
ENROLLMENT, GRADUATION AND EMPLOYMENT
FORM DHE 04-R**

Instructions and Explanations

SCHOOL NAME AND ADDRESS: Official name and address of institution as shown on the application for recertification.

REPORTING PERIOD: Calendar year for which data are reported is the calendar year ending December 31, 2004.

SCHOOL ID: Enter identification number from last year's certificate to operate (lower right corner.)

AUTHORIZED SIGNATURE: Signature of school official responsible for data accuracy and integrity.

Column (1) PROGRAM NAME: List each program offered by the school in which students recruited from Missouri were enrolled and/or graduated.

Column (2) CIP: Classification of Instructional Programs. (A searchable database of CIP codes is available on the Internet at nces.ed.gov/pubs2002/cip2000/. More information is available by request from the department or you can visit nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2002165 for the complete document.) **The CIP classification must agree with the official program inventory.**

Column (3) MALE: Number of male students recruited from Missouri enrolled in the program.

Column (4) FEMALE: Number of female students recruited from Missouri enrolled in the program.

Column (5) TOTAL: Total number of students recruited from Missouri enrolled in the program.

Column (6) Graduated: Total number of students recruited from Missouri who graduated from each program listed during the reporting period.

Column (7) Employed in Training Related Jobs: Enter the number of students recruited from Missouri who graduated from each program and were employed (to the school's knowledge) in a job requiring the application of the training received in the program. Report all known employment instances regardless of whose initiative resulted in the employment. It is recognized that some graduates will neither seek nor be available for placement or employment. These data collected in this column is for information and not evaluation of the school's placement program.

TOTALS FOR SCHOOL: Sum of data reported for all programs. If multiple pages are used, please record the total only on the last page.

COMPLETE FORM DHE 04-R ON NEXT PAGE

This form is available separately from the complete application. If you are completing the application electronically and additional pages of the form are needed, please click [here](#) for access.

- *Because this form requires an original signature, a signed original of this form must be submitted with the application.*

**Coordinating Board for Higher Education
FORM DHE 04-R**

Enrollment, Graduation, and Employment of Students Recruited from Missouri

Name of School	Reporting Period: Calendar Year Ending December 31, 2004.
Address of School	School ID: DHE - <u>00</u>

Authorized Signature

(1) Program Name	(2) CIP	Headcount Enrollment			Outcomes	
		(3) Male	(4) Female	(5) Total	(6) Graduated	(7) Employed in Training Related Jobs
				0		
				0		
				0		
				0		
				0		
				0		
				0		
				0		
				0		
				0		
Totals for School		0	0	0	0	0

SECTION III

EXHIBITS

The school's publications, enrollment agreement, and transcript are submitted as exhibits to demonstrate the institution is making disclosure of all required information to students and prospective students. Checklists are provided for your convenience in reviewing materials for completeness and accuracy. The exhibit checklist also **requires an authorized signature** attesting to the accuracy of the attached documents. The exhibits are evaluated to verify that the institutional, programmatic, financial, student cost, and student services information reported on the recertification application is accurately and consistently disclosed in the school's publications.

The school **must** submit one copy of the following items as exhibits and these items **must** be numbered or labeled appropriately:

1. Current **Publications** and other printed material (catalog, brochure, student handbook, etc.) containing the school's disclosure of required information to students
2. Current completed **Enrollment Agreement** (with student identification information blocked out)
3. Official completed **Transcript** (with all student identification information blocked out)
4. Current **Personnel Information**, including résumés for all new personnel (if applicable)

The school **must** submit one copy of the following items **as applicable** based on application instructions.

5. Additional **Financial Reports** (if applicable)
6. **Supplemental** Information (if applicable)
 - *Please note that if there are any changes to your publications, enrollment agreement or transcript during the certification year, you should submit a copy to the department for review at least thirty days prior to implementing the new document. It is usually advisable to submit changes prior to the final printing of the document in order to avoid possible reprinting costs if changes are needed as a result of our review.*

EXHIBIT CHECKLIST

All exhibit materials attached to this application are true and correct and in compliance with all applicable rules and regulations. Copies of all publications are provided to students and prospective students appropriately and a copy of the completed enrollment agreement is provided to students upon enrollment. Transcript records are maintained permanently in the files of students who enroll in the school.

Signature of Person Authorized by the School

Date of Signing

Exhibit 1 – Publications: Attach copies of materials that are used to provide information about your institution to students and the general public. This should include your catalog, student handbook, brochures, pamphlets, and/or other handouts. If the school maintains a website, the materials in this exhibit will be compared to that site to confirm consistent information disclosure. If information is only available from an online source, a printed copy (with a date) must be submitted as part of this exhibit. A checklist is provided to assist with the completion and review of this exhibit and a completed checklist **must be attached** as a part of this exhibit.

Exhibit 2 – Enrollment Agreement: Attach a completed copy of the school's current enrollment agreement. (Please block out all information that might identify the student.) A completed checklist and enrollment agreement **must be attached** as a part of this exhibit.

Exhibit 3 – Transcript: Attach a completed official transcript for a student that has graduated. (Please block out all information that might identify the student.) A completed checklist and transcript **must be attached** as a part of this exhibit.

Exhibit 4 – Personnel Information: All schools must attach completed copies of administrative personnel forms as directed in the exhibit checklist. Schools not accredited by a recognized accrediting body must submit completed copies of the instructional personnel form for all instructors. For schools not accredited by a recognized accrediting body, this exhibit must include copies of résumés for all personnel hired since the submission of your previous application for certification. Résumés must include, at a minimum, the following items: educational experience, including name of institution(s) attended, dates of attendance and major areas of study, degrees received, etc.; employment information including name of employer(s) and dates of employment; and any additional background information pertinent to the position currently held at the school.

Exhibit 5 – Additional Financial Reports: If you are submitting additional financial information, include it in this exhibit. If this does not apply to your school, check this box. ☐

Exhibit 6 – Supplemental Information: If you are submitting information to supplement your application, or a narrative explanation concerning an attestation, include it as Exhibit 6. If this does not apply to your school, check this box. ☐

- *Please label each exhibit clearly and attach in the order listed.*
- *A signed copy of this checklist **must be attached** at the front of the exhibit section.*

EXHIBIT ONE - PUBLICATION CHECKLIST

This exhibit will be evaluated to determine if all required informational disclosures are made to students and prospective students. Carefully review the description of the information, and clearly **label** your catalog, student handbook, brochures, pamphlets, handouts or other printed materials **where** the disclosure of each category of information can be found. As you complete this checklist, please include a brief description (including the page number, if applicable) that will **assist** us in **locating** each item when we review your materials.

Name and Address of School: The name and address of the school disclosed in your publications should be the official name and address reported in this application.

Document Name/Type: _____ *Page #* _____

Statement of the School's and each Program's Objectives.

Document Name/Type: _____ *Page #* _____

Program Information: The program information disclosed in your publications should be consistent with the information reported on your program inventory.

Specific titles and descriptions of content including course descriptions.

Document Name/Type: _____ *Page #* _____

Explanation of evaluation and completion requirements.

Document Name/Type: _____ *Page #* _____

Specific grade, credit hour, contact hour and/or other performance achievements required for satisfactory completion.

Document Name/Type: _____ *Page #* _____

Definitions of measures of progress.

Document Name/Type: _____ *Page #* _____

Specific methods by which program requirements may be met other than instruction offered by the school.

Document Name/Type: _____ *Page #* _____

Definitions and application of grading methods.

Document Name/Type: _____ *Page #* _____

Policies and procedures for monitoring academic progress, including achievement requirements and pertinent timeframe.

Document Name/Type: _____ *Page #* _____

Expectation of consequences for failure to maintain satisfactory academic progress, including probation, suspension, or termination.

Document Name/Type: _____ *Page #* _____

Exact designation of the certificate or degree bestowed upon satisfactory completion of each program.

Document Name/Type: _____ *Page #* _____

PUBLICATION CHECKLIST – PAGE TWO

Length of each program and course stated in definable units such as hours, days, weeks, months, and/or terms.

Document Name/Type: _____ **Page #** _____

Explanation of the instructional method to be employed (classroom, laboratory, independent study, supervised research, supervised internship or externship, etc.) for various stages of the instruction.

Document Name/Type: _____ **Page #** _____

If applicable, explanation of instructional methods, achievement evaluation, technical requirements, and other policies unique to the delivery of instruction via distance media.

Document Name/Type: _____ **Page #** _____

Schedule of classes, including dates and times of meetings.

Document Name/Type: _____ **Page #** _____

Cost Information: The cost information disclosed in your publications must be consistent with the information reported on your program inventory.

Tuition for each program

Document Name/Type: _____ **Page #** _____

Programmatic and institutional fees

Document Name/Type: _____ **Page #** _____

A reasonable estimate of required charges for:

Books **Document Name/Type:** _____ **Page #** _____

Equipment **Document Name/Type:** _____ **Page #** _____

Materials **Document Name/Type:** _____ **Page #** _____

Tools **Document Name/Type:** _____ **Page #** _____

Services **Document Name/Type:** _____ **Page #** _____

Non-incident educational supplies or charges

Document Name/Type: _____ **Page #** _____

Cancellation Policy: If a statement of the cancellation policy is disclosed in your catalog or other publications, it must be consistent with the statement of the policy on the enrollment agreement. If the cancellation policy is not disclosed in your catalog or other publications, place N/A under *Document Name/Type*.

Document Name/Type: _____ **Page #** _____

Refund Policy: If a statement of the refund policy is disclosed in your catalog or other publications, it must be consistent with the statement of the policy on the enrollment agreement. If the refund policy is not disclosed in your catalog or other publications, place N/A beside *Document Name/Type*.

Document Name/Type: _____ **Page #** _____

PUBLICATION CHECKLIST – PAGE THREE

Student Service Information: The student service information disclosed in your publications must be consistent with the information reported on other application items.

Admission requirements and procedures for applying for admission.

Document Name/Type: _____ *Page #* _____

Conduct policy that includes the expectations of reprimand, punishment, or termination for violation.

Document Name/Type: _____ *Page #* _____

Dress policy that includes the expectations of reprimand, punishment or termination for violation.

Document Name/Type: _____ *Page #* _____

Attendance policy that includes the expectations of reprimand, punishment or termination for violation.

Document Name/Type: _____ *Page #* _____

Grievance policy that specifies what steps students must follow to file a formal grievance with the school.

Document Name/Type: _____ *Page #* _____

Withdrawal policy that specifies what steps students must take to formally withdraw from the school.

Document Name/Type: _____ *Page #* _____

Transcript issuance policy and any other school policy formally stated in school publications.

Document Name/Type: _____ *Page #* _____

Description of the physical facility.

Document Name/Type: _____ *Page #* _____

Description of the qualifications of individual instructional faculty.

Document Name/Type: _____ *Page #* _____

Description of the equipment used as instructional resources.

Document Name/Type: _____ *Page #* _____

Description of the school library and its holdings, if applicable.

Document Name/Type: _____ *Page #* _____

Statement of any institutional or program accreditation or approval claimed.

Document Name/Type: _____ *Page #* _____

Placement Assistance Information: A description of job placement assistance, counseling or other related services available to students. If your school doesn't offer placement assistance to students and graduates, place N/A beside *Document Name/Type*.

Document Name/Type: _____ *Page #* _____

EXHIBIT TWO

ENROLLMENT AGREEMENT CHECKLIST

Must be a completed enrollment agreement!

Name and Address of the School: The name and address of the school that appears on the agreement must be the official name and address reported in this application.

Name of the program in which the student is enrolling.

Beginning date of instruction.

Length of the period of enrollment: Defined to be the time to which a student commits for completion of a course or program.

Cost of all charges made by the school during the period of enrollment.

Conditions of payment: Meaning a description of when payments to the school are due and for what amount, regardless of the sources of funding, and additional fees for alternative payment plans.

Cancellation Policy: The cancellation policy must provide for a period during which an enrollment or admission agreement may be cancelled by the student with refund of all money paid. That cancellation period may not be less than three (3) days, exclusive of Saturday, Sunday and holidays. This statement of the cancellation policy should be consistent with the catalog.

Refund Policy: The refund policy must provide for a reasonable refund formula through at least one-half of the enrollment period. The policy must specify a maximum time lapse for the refund to be made, any conditions under which there would be no refund, or any conditions under which a refund would be made to a third party.

Signature of the student and the **date of signing.**

Signature of an authorized school representative and the **date of signing.**

EXHIBIT THREE
TRANSCRIPT CHECKLIST
Must be a completed transcript of a graduate!

Name and Address of School: The name and address of the school disclosed on the transcript must be the official name and address reported in the application.

Full name of the student.

Information for all courses of instruction to include:

Name of each course

Term and date of each course

Grade assigned for each course

Contact or credit hours attempted

Contact or credit hours earned

Exact award conferred, if applicable.

Date of award conferral, if applicable.

Notation and date of withdrawal, if applicable: For students who do not complete their programs, what method is used to record (on the official transcript) the student as withdrawn and the date of withdrawal?

Explanation:

Name, title and signature of school official.

Date of issuance of transcript.

EXHIBIT FOUR

PERSONNEL INFORMATION

Administrative Personnel

Included as part of this exhibit is a blank administrative personnel form, which includes two personnel information records. Please complete a record for each of the school's principal administrative personnel. The form may be duplicated as necessary to provide sufficient forms to list all pertinent administrative personnel. All schools must provide this information.

- ◆ Please indicate the primary location (branch or main campus) to which each person is assigned or at which he or she performs their administrative duties. This identification number is located in the lower right corner of the certificate of approval.
- ◆ Check all of the administrative functions that apply for each person. At a minimum, at least one individual should be designated for each of the listed categories. If duties are shared by multiple individuals, please check only for the person with primary or lead responsibility for that function. Check "Other Administrative Duties" for individuals with secondary responsibilities or for those with responsibilities not listed.
- ◆ Only one person should be designated to receive the application for recertification and one to receive the certificate of approval. One person may be designated for both but only one person for each of these items is acceptable.

Instructional Personnel

Included as part of this exhibit is a blank instructional personnel form. List all current instructional personnel on this form. Under the category "course taught," please list the courses for which this person has instructional responsibility. If the school's programs do not use a course structure, please indicate the skill or competency area for which this person has instructional responsibility or the program for which this person will be the lead or primary instructor. Additionally, please indicate if this person was employed since last year's recertification application. Résumé information must be included in this exhibit for all individuals identified as new personnel. At the top of the form, please indicate at which location (main or branch) the staff is located. Duplicate as necessary to complete a form for each main and branch campus.

Schools accredited by a recognized accrediting body are not required to complete the Instructional Personnel section only of Exhibit Four.

Administrative Personnel Form

Name	
Title	
E-mail	
Telephone/Extension	

Identification Number of campus (Main or Branch) at which this person works (-)

If employed since the last recertification cycle, please check ☐ and attach a resume.

Administrative Function (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> President/Chief Administrator
<input type="checkbox"/> Branch Campus Director
<input type="checkbox"/> State Licensing Liaison
<input type="checkbox"/> Student Financial Assistance Officer
<input type="checkbox"/> Other Administrative Duties (specify) | <input type="checkbox"/> Main Campus Director
<input type="checkbox"/> Chief Academic Officer
<input type="checkbox"/> Financial Officer
<input type="checkbox"/> Data Coordinator |
|--|---|

Check if the following documents should be sent to this person's attention:

- | | |
|--|--|
| <input type="checkbox"/> Application for recertification | <input type="checkbox"/> Certificate of approval |
|--|--|

Name	
Title	
E-mail	
Telephone/Extension	

Identification Number of campus (Main or Branch) at which this person works (-)

If employed since the last recertification cycle, please check ☐ and attach a resume.

Administrative Function (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> President/Chief Administrator
<input type="checkbox"/> Branch Campus Director
<input type="checkbox"/> State Licensing Liaison
<input type="checkbox"/> Student Financial Assistance Officer
<input type="checkbox"/> Other Administrative Duties (specify) | <input type="checkbox"/> Main Campus Director
<input type="checkbox"/> Chief Academic Officer
<input type="checkbox"/> Financial Officer
<input type="checkbox"/> Data Coordinator |
|--|---|

Check if the following documents should be sent to this person's attention:

- | | |
|--|--|
| <input type="checkbox"/> Application for recertification | <input type="checkbox"/> Certificate of approval |
|--|--|

Duplicate and attach additional pages as needed

If you are completing the application electronically, click [here](#) to access a separate copy of this page for use in completing additional pages as necessary.

Instructional Personnel Form

- ☐ Main Campus DHE Identification Number: - **00**
- ☐ Branch Campus DHE Identification Number: -

Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	
Name:	New <input type="checkbox"/>
Courses Taught:	

Duplicate and attach additional pages as needed

If you are completing the application electronically, click [here](#) to access a separate copy of this page for use in completing additional pages as necessary.